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Reporting Category

Category	Subcategory	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
05A EXCESSIVE FORCE / ON DUTY - INJURY	-	-	-	-	-	-	-

row(s) 1 - 1 of 1

Log No: 1002017 Type:INFO

Accused Members

Review	Name	Status	Accused Overall Finding	Recommended Penalty	No. of Days	Date/Time Served	Created Date	Complimentary History
-	Unknown	CLOSED/FINAL	-	-	-	-	15-DEC-2006	N/A

row(s) 1 - 1 of 1

Attachments

	No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content?	Approve Inclusion?
View	1	FACE SHEET	N/A	-	-	-	TOPPINS, YOLANDA	DEC-15-2006 08:36	-	-	-
View	2	CONFLICT CERTIFICATION	N/A	-	-	-	DEAN, BRUCE	DEC-20-2006 10:47	-	-	-
View	3	CONFLICT CERTIFICATION	N/A	-	-	-	SANCHEZ, JESSICA	DEC-21-2006 16:04	-	-	-
View	4	ADDITIONAL INFORMATION	N/A	1	Attempt to schedule interview with victim	YES	SANCHEZ, JESSICA	JAN-16-2007 10:22	APPROVED	NO	YES
View	5	REPORT (OTHER)	N/A	3	Letters to Complainant and certified mail receipt	YES	SANCHEZ, JESSICA	JAN-16-2007 10:24	APPROVED	NO	YES
View	6	ATTENDANCE AND ASSIGNMENT RECORD	N/A	1	-	YES	SANCHEZ, JESSICA	JAN-16-2007 10:24	APPROVED	NO	YES
View	7	INVESTIGATOR CASE LOG	N/A	1	-	YES	SANCHEZ, JESSICA	JAN-16-2007 10:25	APPROVED	NO	YES
View	8	SUMMARY REPORT	N/A	2	-	YES	SANCHEZ, JESSICA	JAN-16-2007 10:31	APPROVED	NO	YES

row(s) 1 - 8 of 8


Internal Use Only

No Internal Use Only attachments available.

Print Accused Appeal Forms


No Accused Appeal forms available for this Log No.

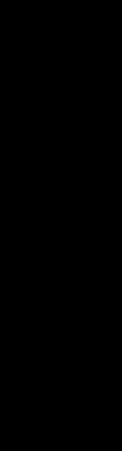
Related Incidents

 **TIP** Related Incidents listed below are for reference only. These may be viewed using the related application search screens.

No Related Incidents associated with this Log No.

Status History

 **TIP** Every employee included in the Status History is subject to be called for legal or administrative proceedings.

Resulting Status	Status Date/Time	Created By	Position	Employee No.	Assigned/ Detailed Unit	Comments
CLOSED AT C.O.P.A.	01-JAN-9999 01:01	CHRIS, SYSTEM	CHIEF DATA BASE ANAL		125 / -	-
CLOSED/FINAL	17-JUL-2007 17:21	DEAN, BRUCE	SUPERVISING INV COPA		113 / -	31JAN07/UNF
PENDING INVESTIGATIVE REVIEW	09-MAY-2007 17:41	SANCHEZ, JESSICA	INVESTIGATOR 2 COPA		113 / -	-
PENDING INVESTIGATION	20-DEC-2006 10:47	DEAN, BRUCE	SUPERVISING INV COPA		113 / -	-
PENDING ASSIGN INVESTIGATOR	18-DEC-2006 13:32	DUFFY, MICHAEL	COOR /INVESTIGATIONS		113 / -	-
PENDING ASSIGN TEAM	15-DEC-2006 09:12	QUERFURTH, PATRICK	SUPERVISING INV COPA		113 / -	-
PRELIMINARY	15-DEC-2006 08:36	TOPPINS, YOLANDA	INTAKE AIDE		113 / -	-

row(s) 1 - 7 of 7

Command Channel Reviewers

No Command Channel Reviewers have been assigned.

SUMMARY REPORT DIGEST-
COMPLAINT REGISTER INVESTIGATION NO.:
CHICAGO POLICE DEPARTMENT

1002017

DATE OF REPORT (DAY-MO.-YEAR)
16 January 2007

To be used in all cases that are to be classified as either EXONERATED, UNFOUNDED, NOT SUSTAINED cases where the Disciplinary Recommendation does not exceed FIVE (5) DAYS SUSPENSION.

SUBMIT ORIGINAL AND 3 COPIES IF ASSIGNED TO SAME UNIT AS ACCUSED.
SUBMIT ORIGINAL AND 4 COPIES IF NOT ASSIGNED TO SAME UNIT AS ACCUSED.

TO: SUPERINTENDENT OF POLICE
ATTENTION ☒ ADMINISTRATOR IN CHARGE, OFFICE OF PROFESSIONAL STANDARDS
☐ ASSISTANT DEPUTY SUPERINTENDENT, INTERNAL AFFAIRS DIVISION

FROM - INVESTIGATOR'S NAME SANCHEZ, Jessica				RANK INV	STAR NO. 292	SOCIAL SEC. NO. XXX-XX-XXXX	EMPLOYEE NO. [REDACTED]	UNIT ASSIGN. 113	
ADDRESS OF INCIDENT 3900 S. Prairie Ave-Phillips H.S				DATE OF INCIDENT - TIME 14 December 2006-1130		BEAT OF INCIDENT 214		LOCATION CODE* 15	
ACCUSED	NAME 1 Unidentified			RANK	STAR NO.	SOCIAL SEC. NO.	EMPLOYEE NO.	UNIT ASSIGN.	
	2								
	SEX/RACE 1.	D.O.B.	DATE OF APPOINTMENT	DUTY STATUS (TIME OF INCIDENT) <input checked="" type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY		<input checked="" type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN		PHYS. COND. CODE 01	
	2			<input type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY		<input type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN			
	IF APPLICABLE - DATE ARRESTED/INDICATED 1.		CHARGES			COURT BRANCH	DISPOSITION & DATE		
	2								
COMPLAINANT	NAME [REDACTED]		ADDRESS** [REDACTED]		CITY STATE Chicago IL	TELEPHONE [REDACTED]	SEX/RACE F/B	D.O.B./AGE 49 YOA	PHYS. COND. CODE 01
VICTIMS	NAME [REDACTED]		ADDRESS** [REDACTED]		CITY STATE Chicago IL	TELEPHONE [REDACTED]	SEX/RACE F/B	D.O.B./AGE 18 YOA	PHYS. COND. CODE 01
WITNESSES	NAME		ADDRESS**		CITY STATE	TELEPHONE	SEX/RACE	D.O.B./AGE	PHYS. COND. CODE

☐ SEE ATTACHED SHEET FOR ADDITIONAL ACCUSED, COMPLAINANTS, VICTIMS, WITNESSES.

ALLEGATIONS	<p>On 15 December 2006 at approximately 0836 hours, the complainant, [REDACTED] telephoned the Office of Professional Standards and registered this complaint with Intake Aide, Yolanda Toppins, #33215, Unit 113, on behalf of the victim, [REDACTED] alleged that on 14 December 2006 at approximately 1130 hours, at 3900 S. Prairie, an unidentified officer; 1) Slapped her on the face, 2) struck her on the head and 3) bent her fingers back.</p>
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I.A.D. LOCATION CODES*

01 Food Sales/Restaurant
02 Tavern/Liquor Store
03 Other Business Establishment
04 Police Building
05 Lockup Facility
06 Police Maintenance Facility
07 CPD Automotive Pound Facility
08 Other Police Property
09 Police Communications System
10 Court Room

11 Public Transportation Veh./Facility
12 Park District Property
13 Airport
14 Public Property - Other
15 Other Private Premise
16 Expressway/Interstate System
17 Public Way - Other
18 Waterway, Incl. Park District
19 Private Residence

I.A.D. PHYSICAL CONDITION CODES

01 No Visible Injury - Apparently Normal
02 No Visible Injury - Under Influence
03 Injured, Not Hospitalized
04 Injured, Not Hospitalized - Under Influence
05 Injured, Hospitalized
06 Injured, Hospitalized - Under Influence
07 Injured, Refused Medical Aid
08 Injured, Refused Medical Aid - Under Influence
09 Deceased
10 Deceased - Under Influence

* IF CPD MEMBER, LIST RANK, STAR, SOCIAL SECURITY, EMPLOYEE NOS. IN ADDRESS BOX, PAX/BELL IN TELEPHONE BOX

SUMMARY

Briefly summarize the investigation describing your efforts to prove or disprove the allegation(s). Indicate whether witnesses or evidence support or do not support the allegations(s). In sustained cases ONLY, copies of the accused member=s Summary of Previous Disciplinary Actions and Record of Previous Complimentary History will be included as attachments.

INVESTIGATION:

The complainant and victim failed to cooperate with this investigation.

NO AFFADAVIT-UNFOUNDED

ATTACHMENT

INVESTIGATIVE REPORTS-
SUPPORTING ALLEGATION
LIST ATTACHMENT NUMBERS:

N/A

INVESTIGATIVE REPORTS-
SUPPORTING ACCUSED MEMBER(S)
LIST ATTACHMENT NUMBERS:

N/A

PHYSICAL EVIDENCE
LIST ATTACHMENT NUMBERS:

NA

TOTAL NUMBER OF ATTACHMENTS
SUBMITTED WITH THIS FILE:

7

FINDINGS-RECOMMENDATIONS

Summarize the findings and recommendations. Rule violations will be cited by number only. One overall recommendation for Disciplinary Action will be made by the investigator. The recommendation will be for ALL sustained findings; recommendations will NOT be made for each sustained allegation. Example: 1. Violation noted, no disciplinary action warranted. 2. That the accused member be reprimanded. 3. That the accused member be suspended for ... days (not to exceed 5 days).

FINDINGS:

Accused Officer-
Allegation #1-#3

Unidentified Officer
Unfounded

O.P.S. Supervisor

DATE INITIATED (DATE COMPLAINT WAS
RECEIVED FOR INVESTIGATION)

18 December 2006

DATE COMPLETED (DATE OF THIS REPORT)

16 January 2007

ELAPSED TIME (TOTAL TIME, EXPRESSED IN DAYS)

29 days

Investigator will initiate the Command Channel Review
for by completing the Investigators Section.

INVESTIGATOR'S SIGNATURE

IF NECESSARY, USE AN 82 X 11" SHEET OF WHITE PAPER TO CONTINUE ANY ITEM.